

County: Walworth
KIWANIS MANOR, INC.
P.O. BOX 292

Facility ID: 3880

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EAST TROY 53120 Phone:(262) 642-3995
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/02): 50
Total Licensed Bed Capacity (12/31/02): 50
Number of Residents on 12/31/02: 47

Ownership: Non-Profit Corporation
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 49

Services Provided to Non-Residents			Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)			%
			Primary Diagnosis	%	Age Groups	%	Less Than 1 Year			
Home Health Care	No						1 - 4 Years			34.0
Supp. Home Care-Personal Care	No						More Than 4 Years			42.6
Supp. Home Care-Household Services	No		Developmental Disabilities	2.1	Under 65	4.3				23.4
Day Services	No		Mental Illness (Org./Psy)	23.4	65 - 74	10.6				-----
Respite Care	No		Mental Illness (Other)	4.3	75 - 84	40.4				100.0
Adult Day Care	No		Alcohol & Other Drug Abuse	0.0	85 - 94	40.4				*****
Adult Day Health Care	No		Para-, Quadra-, Hemiplegic	0.0	95 & Over	4.3				Full-Time Equivalent
Congregate Meals	Yes		Cancer	0.0		-----				Nursing Staff per 100 Residents
Home Delivered Meals	Yes		Fractures	2.1		100.0				(12/31/02)
Other Meals	No		Cardiovascular	14.9	65 & Over	95.7				-----
Transportation	No		Cerebrovascular	8.5		-----				RNs 13.4
Referral Service	No		Diabetes	8.5	Sex	%				LPNs 6.6
Other Services	No		Respiratory	10.6		-----				Nursing Assistants,
Provide Day Programming for			Other Medical Conditions	25.5	Male	31.9				Aides, & Orderlies 42.8
Mentally Ill	No			-----	Female	68.1				
Provide Day Programming for				100.0		-----				
Developmentally Disabled	No					100.0				

Method of Reimbursement

			Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care			Total	%
			No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Resi- dents	Of All
Int. Skilled Care	0	0.0	0			2	6.1	145	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	4.3
Skilled Care	4	100.0	320			25	75.8	122	0	0.0	0	10	100.0	165	0	0.0	0	0	0.0	0	39	83.0
Intermediate	---	---	---			5	15.2	100	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	5	10.6
Limited Care	---	---	---			1	3.0	85	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	2.1
Personal Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	4	100.0				33	100.0		0	0.0		10	100.0		0	0.0		0	0.0		47	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02													

Percent Admissions from:		Activities of		%	% Needing		% Totally		Total						
		Daily Living (ADL)		Independent	Assistance of		Dependent		Number of						
					One Or Two Staff				Residents						
Private Home/No Home Health	3.7	Bathing		0.0	78.7		21.3		47						
Private Home/With Home Health	1.9	Dressing		6.4	87.2		6.4		47						
Other Nursing Homes	13.0	Transferring		12.8	70.2		17.0		47						
Acute Care Hospitals	70.4	Toilet Use		12.8	68.1		19.1		47						
Psych. Hosp.-MR/DD Facilities	0.0	Eating		31.9	61.7		6.4		47						
Rehabilitation Hospitals	3.7	*****													
Other Locations	7.4														
Total Number of Admissions	54	Continence			% Special Treatments				%						
Percent Discharges To:		Indwelling Or External Catheter			4.3		Receiving Respiratory Care		19.1						
Private Home/No Home Health	4.8	Occ/Freq. Incontinent of Bladder			51.1		Receiving Tracheostomy Care		0.0						
Private Home/With Home Health	30.6	Occ/Freq. Incontinent of Bowel			17.0		Receiving Suctioning		2.1						
Other Nursing Homes	3.2						Receiving Ostomy Care		4.3						
Acute Care Hospitals	14.5	Mobility					Receiving Tube Feeding		4.3						
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained			0.0		Receiving Mechanically Altered Diets		14.9						
Rehabilitation Hospitals	0.0														
Other Locations	1.6	Skin Care					Other Resident Characteristics								
Deaths	45.2	With Pressure Sores			0.0		Have Advance Directives		91.5						
Total Number of Discharges		With Rashes			14.9		Medications								
(Including Deaths)	62						Receiving Psychoactive Drugs		66.0						

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities															

		This	Ownership:		Bed Size:		Licensure:								
		Facility	Nonprofit		50-99		Skilled		All						
		%	Peer Group		Peer Group		Peer Group		Facilities						
			% Ratio		% Ratio		% Ratio		% Ratio						
Occupancy Rate: Average Daily Census/Licensed Beds		94.9	92.2	1.03	88.5	1.07	86.7	1.09	85.1 1.12						
Current Residents from In-County		34.0	76.0	0.45	72.5	0.47	69.3	0.49	76.6 0.44						
Admissions from In-County, Still Residing		9.3	25.2	0.37	19.5	0.48	22.5	0.41	20.3 0.46						
Admissions/Average Daily Census		110.2	95.0	1.16	125.4	0.88	102.9	1.07	133.4 0.83						
Discharges/Average Daily Census		126.5	97.5	1.30	127.2	0.99	105.2	1.20	135.3 0.94						
Discharges To Private Residence/Average Daily Census		44.9	38.4	1.17	50.7	0.89	40.9	1.10	56.6 0.79						
Residents Receiving Skilled Care		87.2	94.3	0.92	92.9	0.94	91.6	0.95	86.3 1.01						
Residents Aged 65 and Older		95.7	97.3	0.98	94.8	1.01	93.6	1.02	87.7 1.09						
Title 19 (Medicaid) Funded Residents		70.2	63.8	1.10	66.8	1.05	69.0	1.02	67.5 1.04						
Private Pay Funded Residents		21.3	28.5	0.75	22.7	0.94	21.2	1.00	21.0 1.01						
Developmentally Disabled Residents		2.1	0.3	8.41	0.6	3.43	0.6	3.75	7.1 0.30						
Mentally Ill Residents		27.7	37.9	0.73	36.5	0.76	37.8	0.73	33.3 0.83						
General Medical Service Residents		25.5	23.0	1.11	21.6	1.18	22.3	1.14	20.5 1.25						
Impaired ADL (Mean)		51.5	49.9	1.03	48.0	1.07	47.5	1.08	49.3 1.04						
Psychological Problems		66.0	52.6	1.25	59.4	1.11	56.9	1.16	54.0 1.22						
Nursing Care Required (Mean)		7.4	6.3	1.18	6.3	1.19	6.8	1.09	7.2 1.03						